

REMARKS

In the above-identified Office Action the Examiner has rejected claims 1-3, 13 and 17-22 as unpatentable over Spiegel in view of Sobel et al. and Gillis et al., taken further in view of Gennaro. The Examiner has stated that it would have been obvious to make a single uniform oral tablet (Remington's) containing fluconazole (Sobel et al.) and tinadazole or secnidazole (Gillis et al.) for the treatment of women with vaginitis/vaginosis because uniform tablets are commonly used in oral dosage form and the motivation to make a single tablet would be to provide easier administration of both active ingredients. The Examiner has also stated that the combination of the disclosed amount of fluconazole, secnidazole and tinadazole are within the claimed ranges.

While acknowledging that claims 17-22 define concentrations of each agent which are not within the ranges taught in the prior art, the Examiner has stated that claims 1-3 and 13 recite ranges that are within the claimed ranges. Applicant disputes this, noting that claims 1-3 and 13 recite ranges that are outside that taught by the art. Further, none of the cited art teach or suggest the possibility of lowering the dose of either active ingredients or the possibility of combining them in quantities that are not equivalent.

Lowering dosages of medicaments is counterintuitive if one wishes to cure a specific disease. Further, lowering the doses is not recommended because, as a person skilled in the art would know, it would affect the treatment by possibly creating resistant microorganisms. It was Applicant's invention that a treatment could be created that was still effective, even after lowering dosages, and thus reducing the possibility of adverse events. Thus, by lowering the dose of each active ingredient, the treatment provides an advantage over the prior art.

Applicant notes that Wallin et al. teaches a dosage of tinadazole to be effective in quantities between 1.6g and 2g. However, Wallin et al. does not disclose the possible combination with another active ingredient. It should be noted that the invention as

claimed is not the lowering of an individual dose of a specific active ingredient but, rather, the lowering of a dosage of each of two active ingredients and yet maintain its efficacy. As a result, Applicant believes the claims to be patentable in view of the newly cited art.

The Examiner has also rejected claims 1, 13, 17, 19 and 21 as unpatentable over Spiegel in view of Sobel et al. and Wallin et al. the combination taken further in view of Remington's. The Examiner has stated that it would be obvious to make a single uniform oral tablet (Remington's) containing fluconazole (Sobel et al.) and tinadazole (Wallin et al.) for the treatment of women with mixed vaginitis/vaginosis. The Examiner has noted that claims 17, 19 and 21 define concentrations falling below the amounts taught effective by Sobel et al. and Wallin et al., however, states further that differences in concentration will not support the patentability of subject matter. Applicant notes that such a standard is true for concentrations falling within the ranges taught by the prior art. However, for concentrations falling outside the ranges taught by the prior art, such does not hold true. Accordingly, Applicant believes that claims 17, 19 and 21, as well as 1 and 13, each recite concentrations outside of the range taught by the prior art and, accordingly, are patentable.

Claims 2, 3, 18, 20 and 22 have been rejected as being unpatentable over Spiegel in view of Sobel et al. and Videau et al. The Examiner has stated that it would be obvious to make a single uniform oral tablet (Remington's) containing fluconazole (Sobel et al.) and secnidazole (Videau et al.) for the treatment of women with vaginitis or vaginosis. Again, the Examiner wrongly states that the claims recite the amounts of fluconazole and secnidazole to be within the amounts taught by the prior art. Because Applicant has specifically recited the dosages of the named ingredients as below that of the prior art, Applicant believes that such claims are allowable.

Claims 6 and 16 have been rejected as unpatentable over Spiegel in view of Sobel et al., Gillis et al. and Remington's taken further in view of US Patent 5, 660,860 for the reasons stated above with regard to the patentability of claims 1 and 2. Applicant believes that these claims should also be allowable.

Claim 16 has been rejected as unpatentable over Spiegel in view of Sobel et al., Wallin et al. and Remington's, the combination taken in view of US Patent 5,660,860. For the reasons set forth above with regard to the patentability of Claim 1, Applicant believes that Claim 16, being dependent upon Claim 1 would be patentable as well.

Claim 6 has been rejected as unpatentable over Spiegel in view of Sobel et al., Videau et al. and Remington's taken in view of US Patent 5,660,860. For the reasons set forth above with regard to the patentability of Claim 2, Applicant believes that Claim 6 would also be allowable.

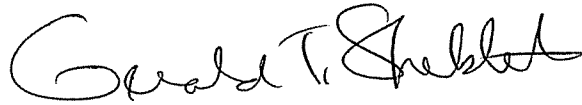
Applicant hereby requests reconsideration and reexamination thereof.

No further fee or petition is believed to be necessary. However, should any further fee be needed, please charge our Deposit Account No. 23-0920, and deem this paper to be the required petition.

With the above amendments and remarks, this application is considered ready for allowance and Applicant earnestly solicits an early notice of same. Should the Examiner be of the opinion that a telephone conference would expedite prosecution of the subject application, he/she is respectfully requested to call the undersigned at the below listed number.

Appl. No. 10/762,616
Amdt. dated 12 January 2011
Reply to Office action of 12 October 2010

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Gerald T. Shekleton". The signature is fluid and cursive, with the first name "Gerald" being more prominent and the last name "Shekleton" following in a similar style.

Dated: 12 January 2011

Gerald T Shekleton
Reg. No. 27,466
Husch Blackwell LLP
120 South Riverside Plaza, 22nd Floor
Chicago, Illinois 60606
Phone: (312) 655-1511
Fax: (312) 655-1501